

San Diego had been adopted by the House of Delegates without a single dissenting vote.

Emphasis was laid on the fact that a two-thirds vote of the entire membership of the California Medical Association was necessary if the legal requirements for the formation of a corporation in California were to be fulfilled.

Members were urged to send in their ballots promptly so that prior to December 1, 1929 a more than two-thirds vote would be a matter of official record.

It was stated that incorporation would place no more responsibilities or obligations on our members, one to the other, than exist under our present system. The possibilities for greater progress, which incorporation of the California Medical Association would make possible, were also indicated.

The officers of the Association have not been surprised at the slowness with which the ballots have come in. Your officers realized that many members would promptly vote, but that a large number would wish to consider the matter further before sending in their ballots. In practice that meant that in many cases the ballots would be put aside on the desks of busy physicians, to meet the fate that so often comes to such intentions, namely, that of being overlooked or forgotten.

These comments are again made in order to urge every member of the Association who has not yet voted, to find his ballot and reply envelope, and to promptly mail the ballot to the new address of the California Medical Association at Four Fifty Sutter, Room 2004, San Francisco.

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*Do Not Fail to Vote on Incorporation.*—In union there is strength. Through coöperative effort of members, greater results can be secured for the California Medical Association. Each individual member of the California Medical Association has his rights, but at the same time each individual member has his membership duties and obligations. To exercise his right of suffrage, either for or against, on so important a matter as this of incorporation is one of the duties and obligations that cannot be delegated to other colleagues or officers. It must be done by each individual member after the procedure prescribed by the laws of California. Every member should vote.

To repeat, if you have not yet voted, and your eyes catch these lines, then by all means look up your ballot, mark it to express your wishes, put it in the reply envelope and promptly mail.

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*Constitution and By-Laws.*—Before or about the time this issue of CALIFORNIA AND WESTERN MEDICINE reaches you, it is hoped that a copy of the new constitution and by-laws which was adopted at the San Diego annual session in May last, will have been placed on the desk of every member of the California Medical Association.

An inspection of the leaflet will reveal to you that the typographical make-up is very different from the deadening and uninteresting printed form of the usual run of by-laws. The special committee in charge of the printing has spared no effort in order to carry out the instructions of the Council and to so arrange the printing and index that the constitution and by-laws reprint would be understandable and easy of reference to all who were sufficiently interested to scan its pages.

As has been so often stated, organized medicine as we nonsectarian physicians understand it, works through our national, state, and component county medical societies. Organized medicine through those institutions safeguards both the public health and the interests and standards of the medical profession. It behooves each of us, as members of such a profession, to know somewhat of the rules of government of the organizations which protect our individual interests, while we give almost our entire time to professional service to our lay fellows.

You are urged, therefore, at some time when you are in the mood, to study this new constitution and by-laws. Such a survey will give to every reader a better orientation as to the bigness of the problems and of the responsibilities of organized medicine in California, and of the methods which, with the passing of years, have been brought into being in order to better attain the standards and aims to which we are committed.

#### LICENSURE PROBLEMS IN CALIFORNIA

*Present Medical Practice Act Is a Patchwork.* The Medical Practice Act of California, like that of most of the states, is a patchwork. At almost every legislative session in recent years there have been proposed, or have come into being, amendments which have been based largely on experiences with the many problems which the members of the Board of Examiners are called upon to solve. The strongest proponents of the present Medical Practice Act of California would not contend that some of its provisions could not be put into better form. Its critics believe consideration might well be given to a goodly number of what seem to be desirable changes so that action thereon might be had through initiative or legislative action.

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*Digest of Present Medical Law as Printed in the State Medical Directory.*—Every member of the California Medical Association receives the *Directory of Physicians and Surgeons, Naturopaths, Drugless Practitioners, Chiropodists, Midwives* published by the Board of Medical Examiners. The 1929 edition of that publication on page 10 prints a digest of the Medical Practice Act as it is, with the exception of the amendments passed by the California legislature in the spring of this year. Members who are sufficiently interested and who wish to scan the entire Medical

Practice Act of California can find the same in the *American Medical Directory*, eleventh edition, 1929, page 177.

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*House of Delegates Authorizes a Study of the Medical Practice Act.*—At the 1929 annual session of the California Medical Association at San Diego the Council was authorized to appoint a special committee to study the present Medical Practice Act and basic science acts and report thereon (see CALIFORNIA AND WESTERN MEDICINE, June 1929, page 437). At the last meeting of the Council, held in Los Angeles on September 28, 1929, the committee was appointed.

It was felt that such a study should include not only the law with all its various provisions as it now stands, but should also consider changes, deletions or additions thereto. The committee report should also recommend whether or not a proposed new medical practice act should be submitted to the next legislature, which will convene in January 1931, or whether a new medical practice act and a possible basic science law should be submitted for an initiative vote by the citizens of California in the state election which will be held in the fall of 1930.

Every member of the Association who has opinions or suggestions bearing on the Medical Practice Act of California or on a possible basic science act, is requested to put the same in writing, and to forward the same to the secretary of the Association so that the special committee may take the same into consideration.

The California Medical Association is the great and powerful organization which stands behind the California Board of Medical Examiners in its efforts to protect the public health through maintenance of standards of practice, and by insistence that illegal and incompetent persons shall not be permitted to hold themselves before the public as competent practitioners of the healing art.

The members of the California Medical Association, all of whom have secured licenses to practice in California, should maintain an active interest in the state laws having to do with such licensure.

If our present Medical Practice Act can be improved, to the mutual advantage of the lay public and of the medical profession, then there would seem to be no reason why such changes should not be considered; and if deemed advisable, suitable amendments and changes should be prepared and advocated. If the Medical Practice Act, as it reads, is as good as can be desired, then a conclusion to that effect would also be worth the while.

A thorough study of the entire licensure problem cannot be other than advantageous to all concerned. As the work continues, the subject will be further discussed in CALIFORNIA AND WESTERN MEDICINE.

## WOMAN'S AUXILIARY OF THE C. M. A.

*The Woman's Auxiliary Movement.*—Several years ago the wives and sisters of some physicians who had become interested in certain social problems then confronting the medical profession formed an organization known as a Woman's Auxiliary. The movement received the endorsement of the American Medical Association, and its state medical units were urged to bring into being state auxiliaries, which in turn would be made up of county auxiliaries. The plan of organization was modeled after that of the American Medical Association, with national, state, and county units.

In some of the states, as in Texas for instance, the Woman's Auxiliary during the last few years has been able to be of great service as a contact organization between organized medicine and lay organizations; and through its good work has given a real reason for its existence.

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*The California Woman's Auxiliary.*—In California the movement for a Woman's Auxiliary took a tangible form at this year's annual session at San Diego, when an initial organization was formed. The minutes of the organization meeting were printed in CALIFORNIA AND WESTERN MEDICINE of July 1929, page 68. The officers there listed will be glad to coöperate with local groups desiring to form auxiliaries, and correspondence in regard thereto is invited.

The California Woman's Auxiliary, as formed at San Diego, is to exist only until the county woman's auxiliaries, which it is hoped will be organized prior to next year's annual session, begin to function in regular form. The underlying principles and by-laws for the California Woman's Auxiliary were printed in the article previously referred to.

A perusal of the rules laid down by the Council will show that the interests of the profession and of the lay public have been constantly kept in mind. A county woman's auxiliary working along legitimate lines can be of real aid and service, both to the profession and to the laity. The members of such an auxiliary can maintain contacts and promote interests and activities vitally concerned with the public health, and can do work for which busy physicians only rarely can spare the time.

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*How to Organize a County Woman's Auxiliary.* The formation of a county woman's auxiliary should not be difficult for any group that is interested. The following procedure could be observed.

Through a special committee appointed by the secretary of a county medical society, an invitation can be sent to a group of eligible women who are known to have an interest in coöperative endeavor along these lines.

At the meeting so held, a motion can be made to organize, adopting as the by-laws the rules